# County Council of the County of Lanark EDUCATION COMMITTEE

# THIRTY-FOURTH ANNUAL REPORT

ON THE

MEDICAL INSPECTION,
SUPERVISION, AND TREATMENT
OF SCHOOL CHILDREN





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1942-43

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### TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE OF THE COUNTY OF LANARK.

I beg to submit the Thirty-fourth Annual Report on the Medical Inspection, Supervision and Treatment of School Children in the County of Lanark for the year ended 31st July, 1943.

This Report, owing to War conditions, is necessarily abbreviated, but all the more important particulars of the working of the School Medical Service during the past year are to be found either in the text or in the statistical tables.

Owing to the retiral of Dr. John Macintyre, Executive School Medical Officer, on 12th April, 1943, after a continuous service of over 33 years, this report has been prepared by me and is in accordance with the Memorandum on School Health Administration issued by the Department of Health for Scotland.

JOHN YOUNG,
Acting Executive School Medical Officer.

School Medical Inspection Department,
County Offices,
Hamilton, February, 1944.

#### STAFF.

#### Executive School Medical Officer.

(a) JOHN MACINTYRE, M.B., Ch.B., D.P.H.

#### Acting Executive School Medical Officer.

(b) JOHN YOUNG, L.R.C.P. & S. Ed., D.P.H.

Assistant School Medical Officers.

ANN K. CORMACK, M.B., Ch.B.

JANET B. CUNNINGHAM, M.B., Ch.B., D.P.H.
ISABEL C. DARLING, M.B., Ch.B., D.P.H.

- (c) ALEX. C. DOUGLAS, M.B., Ch.B., D.P.H. VIDA J. PERRY, M.B., Ch.B.
- (d) ERNEST G. Y. THOM, M.B., Ch.B. (Temporary Appointment)

#### Dental Surgeons.

R. JARDINE BEATTIE, L.D.S.

(e) WILLIAM GIBSON, L.D.S.
MARY H. HINSHELWOOD, L.D.S.
ANNE G. JACKMAN, L.D.S. (Temporary Appointment).
ANDREW C. F. RANKIN, L.D.S.
ARCHIBALD W. M. WATSON, L.D.S.
ELIZABETH WATSON, L.D.S.
JAMES McD. WEATHERSTON, L.D.S.

#### Part-Time Ophthalmic Surgeons.

JAMES HILL, M.B., Ch.B., D.O.M.S. H. SOMERVILLE MARTYN, M.A., M.B., Ch.B. JOHN A. MORTIMER, M.D., F.R.C.P.E.

Part-Time Ear, Nose and Throat Specialist. ROBERT A. GRAY, M.B., Ch.B.

#### Nurses.

MARY M. BAIN.
MARY M. BENNET.
HELEN S. BERTRAM.
JESSIE M'L. BLACK.

- (f) MARY A. BOYLE.

  MARTHA CHISLETT.

  RACHEL DOBIE.

  ANNIE N. DOUGLAS.

  FLORENCE D. FLEMING.

  ADA FOWLIE.

  JEAN HANNAH.

  AMY S. T. HISLOP.

  MARGARET K. LAMOND.
- AGNES L. D. MILLER.
- (g) ANNIE MACAULEY.

  MARJORY K. M'DOUGALL.
  ISABEL MACKINNON.
  JEAN G. M'GHIE.
  NEILINA M'INNES.
  MARGARET NEILSON.
  HELEN PARK.
- (h) ANNE J. SORLEY.

  MARGARET C. R. SUTTER.
  ISABEL TAVLOR.
  MARY A. YATES.

#### Nurses (Temporary Appointment).

MARGARET RUSSELL.

CATHERINE FOWLER.

#### Dental Attendants.

MARY GOLD.

- (j) SARAH M'GHIE.
- (i) MARGARET JAMES.
- (k) ELIZABETH M'KENZIE.

#### Clerical Staff.

Chief Clerk-ROBERT A. M'ROBBIE.

- (l) JAMES BISHOP.
- (m) JOHN PORTER.
  MARY W. BOYD.

CATHERINE ROACH.
JESSIE SPEIRS.
HELEN S. STEVEN.

#### Clerical Staff (Temporary Appointment).

MARK ALLAN.

BARBARA MONAGHAN.

- (a) Retired 12/4/43.
- (b) Appointed 13/4/43.
- (c) On Active Service with H.M. Forces 16/I/43.
- (d) Appointed 25/I/43.
- (e) On Active Service with H.M. Forces 9/I0/41.
- (f) Resigned 30/4/43.
- (g) Resigned 1/8/42.

- (h) On Active Service with H.M. Forces 1/2/41.
- (i) Appointed 31/8/42.
- (j) Appointed 31/8/42.
- (k) Appointed I/10/42.
- (l) On Active Service with H.M. Forces 27/2/41.
- (m) On Active Service with H.M. Forces 3/6/42.



REPORT on the MEDICAL INSPECTION, SUPERVISION, and TREATMENT of SCHOOL CHILDREN in the COUNTY of LANARK, for the year ended 31st July, 1943.

#### I. LIST OF STAFF.

The personnel of the medical, dental, nursing and clerical staffs—both whole and part-time—is shown on page 4 of this Report. Changes in personnel which have occurred since the last report are also indicated.

#### 2. GENERAL STATISTICS.

The number of schools in the area is as follows:—

(a)	Primary			• • •			 211
(b)	Junior Sec	ondary					 14
(c)	Secondary						 13
(d)	1. Special	Schools					 11
	2. Special	Classes	at Ce	ertified I	nstitu	tions	 2
	of children			0			 86,509
*Number	of children	ı in ave	rage	attenda	nce		 73,189

<sup>\*(</sup>The figures are taken from the official return for June, 1943.)

#### 3. SANITARY CONDITION OF SCHOOLS.

The sanitary condition of the schools in the whole educational area continues to be satisfactory. Classrooms, halls, cloakrooms are all regularly cleaned. Latrines are kept in good repair and are clean and tidy. The removal of iron railings for munition purposes has in many instances increased the total playground area. Repairs to buildings and interior fittings are carried out as required. The consumption of milk in the classrooms and mid-day meals in halls, &c., leads to more fouling of floors, but this is satisfactorily dealt with. Heating, lighting and ventilation have, on the whole, been adequately maintained, due regard being observed to war-time economies.

#### 4. ORGANISATION AND ADMINISTRATION.

A. System and Extent of Medical Inspection and Treatment.

The system and extent of medical inspection and treatment differed in no material respect from those of former years. The routine inspection of the pupils in the four categories was carried out as usual. Special cases put forward for examination by head-

masters and teachers were also attended to. The number of revisits made to schools was not so great as in previous years. This was unavoidable, due to the transfer of one of the medical staff to military service. The total number of children examined at the routine inspections falls a little short of that of the previous year, due principally, to the considerable reduction in the number of evacuec children.

The scheme of treatment continued to function throughout the year as formerly. The minor ailments clinics were well attended, and afforded treatment to a large number of children. The visual clinics continued to provide treatment for defects of vision and other eye conditions. Fuller details of the working of these services, together with those for Tonsils and Adenoids, Orthopaedic and Dental Treatment will be found in the later pages of this report.

- B. System and Extent of Dental Inspection and Treatment.

  Dental inspection and treatment has been carried out as in previous years. No change in the scheme has been made. Details of the results will be found in section 7 of this report.
- C. School Nursing and Arrangements for "Following Up." No change in the arrangements falls to be recorded. These have been fully dealt with in previous reports. The inspection of children at school, treatment at the various clinics, and home visiting, where necessary, constitute the principal duties of the nursing staff.
- D. Co-ordination with Public Health Services.

Close co-operation continues to exist between the school medical service and the Medical Officers of Health and public health services in the county and burghal areas. Details have appeared in previous reports.

- E. Co-operation with Voluntary Bodies.

  This has been fully dealt with in previous reports.
- F. Co-operation with Teachers and Parents.

This is an essential condition for the smooth and efficient working of a school medical service. It is gratifying to record that, in the opinion of the School Medical Officers, the headmasters and teachers, with few exceptions, are extremely helpful to them and take an active and intelligent interest in the examination of their pupils. A word of thanks is due to them for their valued co-

operation. Parents have by easy stages extending over many years progressed from open hostility to a state of confidence in the school medical service and an increasing appreciation of the benefits to be obtained. An ever increasing number of parents present themselves at the minor ailments clinics asking for advice regarding their children. Considerable numbers also attend at the routine inspections of the pupils at school, chiefly of the five years old group. On these occasions a very effective form of propaganda in health matters is carried on by the medical officers and nurses. Medical officers also frequently give talks at women's rural institutes and parents' and teachers' associations, etc.

#### 5. THE FINDINGS OF MEDICAL INSPECTION.

The total number of children examined at the routine medical inspection of the schools shows a fall from that of the previous year. This is almost entirely due to the considerable decrease in the number of evacuee children. During 1941-42 the number of Government and voluntary evacuees examined came to 832, as compared with 317 in 1942-43. The total number of children in the various age groups due to be examined in the course of the year was 26,355. Of these 25,915 were examined, giving a percentage of 98·3. This must be considered very satisfactory as it was not found possible to have as many revisits to schools as in previous years. Details of the number of children examined in the various age groups will be found in Table I (A).

Table I. (B) gives the number of special (non-routine) cases examined during the year, and also the number of cases re-examined at the re-inspections by the medical officers. It will be seen that 5,239 special cases were dealt with and 9,504 re-examined at subsequent revisits to the schools. Table II. shows the conditions discovered at the examination of the various age groups. The total number of children notified as suffering from defects requiring attention (exclusive of want of cleanliness and dental cases) was 5,520. This includes fifty evacuee children. A supplementary table at the end of this report shows in detail the conditions notified and the remedial measures carried out.

The number of revisits paid to the schools by the medical staff was not so great as in the preceding year. This was due to illness, calling up for military service of one medical officer, and rearrangement of duties necessitated by the retiral of Dr. Macintyre, Executive School Medical Officer. In consequence, it was im-

possible to ascertain accurately the total number of conditions which were remedied during the year.

The conditions found at the routine examinations and the various defects calling for treatment are very much the same from year to year. Special attention was directed to the state of cleanliness of the pupils, and especially to the presence of vermin on the heads and bodies. This, as was pointed out in last year's report, constitutes one of the less satisfactory features of school life. Of the total conditions notified (this includes routine and special cases), numbering 12,338, nits of the head and dirty heads accounted for 1,317 or 10.7 per cent. of the whole. Head lice accounted for 2.2 per cent., and lice of the body for 0.4 per cent. of the cases. Although these figures indicate an improvement in these conditions, as contrasted with those of the preceding year, there are still too many children who have verminous heads. Girls are the chief harbourers of head vermin due, partly, to the prevailing fashion for longer hair. In addition, there is still evidence of considerable parental neglect. This matter was fully dealt with in last year's annual report, and what was written then still holds good.

The nutritional state of the school children throughout the county continues to be satisfactory. A special survey was carried out at the request of the Ministry of Health during the period December, 1942, to June, 1943. The nine years old group of children was chosen as the most suitable one, and two examinations were made, an interval of six months elapsing between them. A short account of this survey appears in the pages of this report under the heading: Examinations other than routine school examinations.

The following table gives the average heights and weights of the school children in the County compared with the Anthropometric Committee's Standard:—

AVERAGE HEIGHT IN INCHES.

Age.	51		91		121	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Anthropometric Committee's Standard	41.2	41.0	50.7	50.0	56·Q	56-8
County of Lanark	42.1	42.9	50.8	50.6	56.3	57.5

Average Weight in Lbs.

AGE.	5	$5\frac{1}{2}$		91/2		12½	
Anthropometric Com	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
Anthropometric Committee's Standard	40.5	40.0	64.9	59.3	79.4	80.2	
County of Lanark	42.1	41.0	64.8	60.0	79.9	80.8	

It will be seen from the above statement that the heights and weights of school children in Lanarkshire are well maintained and, so far as they have any bearing as an index of the state of nutrition, are satisfactory.

Diseases of the skin, generally, were more prevalent than in former years. Ringworm of the head and body shows an increase. Impetigo is stationary, and cases of scabies showed a slight rise in numbers.

Throat conditions necessitating operation were practically the same numerically as in the preceding year. Glands requiring operation or other treatment such as Ultra Violet Radiation were less numerous. The incidence of squint appears to be more or less a slightly varying quantity throughout the years. There was no increase in diseases of the external eye. The number of children recorded for defective vision is lower, with a corresponding decrease in those notified as requiring treatment for errors of refraction. Diseases of the ear and defective hearing show very little variation from previous years. Disorders of speech, including stammering, show no tendency to increase. Lung diseases were somewhat more numerous, probably due to the prevalence of whooping cough, while cardiac conditions show an increase in the acquired and functional categories and a decrease in the congenital variety. Thirteen cases of infectious disease were encountered in the school. during the year. Of the conditions tabulated as other diseases and defects and numbering 653, the following are some of the more important: Anaemia, 298 cases; Eneuresis, 61; Enlarged Thyroid, 20; Rheumatism, 25; Sprains and fractures, 9; Pharyngitis and Tracheitis, 20; Hernia, 10; Diabetes, 4; Chorea, 18; Thyroid insufficiency, 1; Osteomyelitis, 3; Pseudo-hypertrophic muscular paralysis, 1; Tape Worm, 2; Obesity, 18; Nephritis, 3; Glycosuria, 1; Gastritis, 5; Ganglion, 3; Cystitis, 3; Jaundice, 2; Mastitis. 1.

Examinations Conducted by the School Medical Staff other than Routine School Examinations.

The chief examination to come under this heading consisted of a nutritional survey of the nine years old children in 57 selected schools in the county and burghal area. This survey was undertaken at the request of the Department of Health for Scotland to ascertain if there was any evidence of an increase in malnutrition due to war conditions. A short account of this survey and its findings follows.

In addition to the ordinary routine work in schools a very large number of other examinations is made by the school medical officers involving a considerable portion of their working time. Large numbers of special cases recommended for special medical examination and report by the various School Management Committees are examined either at their homes or at convenient centres. The summary given below shows the nature and extent of the special examinations made during the year:—

(a) Absentee children or irregular attenders	. 828
(b) Physically and mentally invalid children a special schools or classes—	t
(1) Physical	. 535
(2) Mental	. 389
(c) Physically or mentally invalid children fo admission to special schools—	r
(1) Physical	. 152
(2) Mental :	. 77
(d) Applicants for part-time employment (Employ	
ment of Children Act)	. 326
(e) Examinations under Children and Young Persor Acts—	ıs
(1) Juvenile delinquents	. 148
(2) Guardianship cases	. 46
(f) Necessitous children (feeding, boots, clothing etc.)	
(g) Members of Education Committee Staff (teacher janitors, school cleaners, clerical staff, etc.	

(h)	Students in preliminary training profession		teaching	3
( <i>i</i> )	Applicants for participation in the Holiday Camp Scheme .		nmittee's	1,235
( <i>j</i> )	Deaf or deaf-mute children .		••	9
(k)	Blind children			_
(1)	Certification of ineducable ch General Board of Control .		to the	38
(m)	Diphtheria Immunisation—			
	(1) Number of inoculations .			1,010
	(2) Number of sessions involved	ved .	•••	42
(n)	Children for admission to the Home at Wiston Lodge .			97

NUTRITIONAL SURVEY—DECEMBER, 1942—June, 1943.

In December, 1942, a survey of the nutritional state of the children attending Lanarkshire schools was carried out at the request of the Department of Health for Scotland. The object of this survey was to determine if, after three years of war conditions, there was any deterioration in the nutrition of the children. After consideration, it was agreed that, as it was impossible to examine every school child, the nine years old group of children due for routine examination during the year would be the best group for the purpose. It was felt that examination of this particular group would give a good cross section indication of all-the-children's standard of nutrition. Two examinations were deemed necessary, the first at the routine inspection and the second six months later. Each nine year old child, therefore, had its nutritional state assessed twice.

A form, one for each child, was prepared to give the following particulars:—

- (1) Whether child's father was regularly employed.
- (2) Whether the mother was engaged in outside employment.
- (3) If any of the child's brothers and sisters, living at home, were employed.
- (4) Whether the child took a hot mid-day meal at school.

- (5) If not, did the child get a hot dinner regularly at home.
- (6) If the child took milk regularly at school.
- (7) Whether the child had had a recent serious illness.

The rest of the questions dealt with the nutritional state of the child and the home conditions, as far as could be ascertained, i.e.:

- (8) Nutrition—
  - (a) Very Good.
  - (b) Average.
  - (c) Below Average.
- (9) Home Conditions—
  - (a) Good.
  - (b) Fair.
  - (c) Unsatisfactory.

As there is no single test for malnutrition, the medical officers in their evaluation of the nutritional condition of the children took into account the following factors; height and weight, muscular weakness, pallor, mental apathy, manifestation of rickets, lack of sleep, and any other relevant consideration.

The home conditions were inferred from the condition of the children in respect of cleanliness, state of clothing and footgear, and any other evidence indicative of good surroundings or the reverse. This was supplemented by information obtained from the teachers.

Fifty-seven schools were selected for the purpose of the survey. These were situated in the following districts; Airdrie Burgh (7 schools), Blantyre Parish (3 schools), Bothwell Parish (7 schools), Cambuslang Parish (6 schools), Coatbridge Burgh (5 schools), Hamilton Burgh (2 schools), Larkhall District (3 schools), Mother well and Wishaw Burgh (5 schools), New Monkland Parish (3 schools) Rutherglen Burgh (6 schools), Shotts Parish (2 schools), Upper Ward of County (8 schools).

These are all industrial areas, except Shotts and New Monkland which are mining areas, and the Upper Ward which is definitely

rural. It was considered this selection would give a good cross section of all the schools.

The survey was carried out first at the ordinary routine inspection of the pupils who were unaware in advance that any special investigation was to be carried out. This of necessity prolonged the examination of the nine years old group and took up considerable time. The children were asked the questions and the answers noted down and then checked over by asking the questions a second time.

The second examination was made six months after the first.

It was hoped that the two examinations would be conducted by the same medical officers, but this, due to service adjustments, did not materialise. The results, however, showed definite uniformity of opinion.

The table which follows shows the findings of the first part of the survey compared with those of the second part six months later:

		August—	amination. December, 42	Second Examination January—June, 1943	
No. of Schoo	ls Examined	5	7	5	7
	ren Examined	2,8	24	2,4	52
		Number	Per cent.	· ·	Per cent.
Nutritional Category.	{ Very Good Average Below Average	738 2,046 40	$26 \cdot 1 \\ 72 \cdot 4 \\ 1 \cdot 4$	636 1,786 30	25.9 $72.8$ $1.2$
_	takers of Milk in	1,922	60.9	1,780	72.6
Regular part in School	akers of Hot Dinner	375	13.3	551	22.5
	akers of Hot Dinner	2,086	73.8	1,835	74.8
Home Conditions	Good Fair Unsatisfactory	1,735 841 248	61·4 29·8 8·8	1,602 714 136	$65.3 \\ 29.1 \\ 5.5$
Fathers serv	larly employed ving with H.M.	$\left. \begin{array}{c} 2,204 \\ 316 \end{array} \right\}$	89.2	$\left. \begin{array}{c} 1,901 \\ 272 \end{array} \right\}$	88.6
Mothers em Part-Time	ployed Whole or	530	18.8	476	19-4
Households of family	with other members working	1,163	41.2	1,059	43.2
No. of pupils	s who had suffered nt illness	67	2.3	55	2.2

It will be observed that a smaller number of children was examined on the second occasion. This was due to children being absent from school, children having left the county or gone to other schools, and illness.

The results of the second survey approximate very closely to those of the first, showing quite definitely that there had been no deterioration in the standard of nutrition.

An increase in the number of children taking milk regularly at school from 60 per cent. to 72 per cent., and an increase in those partaking of hot dinner at school from 13 per cent. to 22 per cent. are notable features. The increase in the latter instance is due to a corresponding increase in the number of schools where dinners are provided.

The conclusions to be drawn from a consideration of these statistics show:—

- (1) That there is no malnutrition in the County which can be attributed to war conditions.
- (2) That the nutritional state of the children is as good as in previous years and better than in some of the pre-war years.
- (3) That the milk and hot dinners provided at schools are very valuable aids in the provision of a balanced diet.

There was a rather surprising want of correlation between bad home conditions and the nutrition of the children. Many of those from unsatisfactory homes showed no evidence of malnutrition, probably a result of their inherent stoutness of constitution. In this connection it has to be remembered that one cause of malnutrition is overeating. Another cause, which is often not sufficiently appreciated, is want of sleep. Taken as a whole, the results are very satisfactory, and indicate that there is a sufficiency of suitable food to ensure a proper standard of nutrition.

#### 6. MEDICAL TREATMENT.

#### A. MINOR AILMENTS.

The minor ailments clinics continued to function as in previous years. The number of children attending these clinics shows no

sign of any falling off as compared with other years. The total number of children who attended at the various clinics during the past year is 23,169. The total attendances made during that period were 136,166. These figures are only a little less than those for the preceding year, which was a record one. The amount of work done at the Minor Ailments Clinics is large and at times taxes the resources of the Medical and Nursing staffs engaged there to the full. There is no doubt that regular visitation of the schools by members of the nursing staff is a valuable means of assuring that children in need of treatment for any minor ailment are directed to the clinics for suitable treatment. Minor ailments are not the only condition seen at the clinics. Quite frequently those of a major character make their appearance, and are dealt with by immediate reference to the family doctor for continuous observation and treatment. The time at the disposal of the clinic staffs for the treatment of the large numbers of children who attend is limited and is sometimes inadequate. Perhaps, when peaceful times come again, it may be possible to have clinics which will function on every day of the week instead of during two days as at present. The numbers could then be distributed more evenly with great advantage to everyone concerned. Parents frequently bring their children to the clinics for advice and guidance about scholastic matters and the children's fitness for school attendance. The Medical Officers are also often consulted about a child's backwardness in learning and the advisability of attending a special school or class.

In Table VII. will be found a detailed account of the various conditions treated at the minor ailments clinics with the number of attendances made. As usual, skin conditions constitute the great majority of the ailments treated. Scabies, impetigo and septic sores account for 69.4 per cent. of all cases treated. There appears to be very little fall in the prevalence of scabies, and it still is the cause of a great amount of absenteeism from school attendance. There is an unfortunate belief held by some people that scabies is due to dirty habits and conditions and is a blot on the family name. Consequently they are averse to seeking treatment at the clinics during the early stages of the disease and generally appear when septic infection supervenes or when a dermatitis caused by too vigorous or improper home treatment forces them to seek skilled assistance. These cases often require prolonged treatment.

The following is a summary of the number of children treated and the attendances made at the Committee's fixed clinics:—

Established Clinics.

Clinic.	Medical Officer.	Children treated.	Attendances made.
Airdrie.	Dr. Darling.	2,349	13,898
Baillieston.	Dr. Cormack.	1,045	7,057
Bellshill.	Dr. Perry.	1,517	7,719
Blantyre.	Dr. Cormack.	1,523	7,255
*Cambuslang.	Dr. Cunningham.	2,126	10,209
Coatbridge.	Dr. Darling.	2,746	17,302
Hamilton.	Dr. Thom.	2,262	16,127
Larkhall.	Dr. Thom.	1,356	8,765
Motherwell.	Dr. Young.	1,203	7,212
Rutherglen.	Dr. Cunningham.	1,864	9,952
†Shotts.	Dr. Wilson.	430	2,369
Wishaw.	Dr. Young.	1,016	6,428
		19,437	114,293

<sup>\*</sup> In addition, nurses of the school staff treated 238 children (with 1,147 attendances), for scabies at the Health Institute, Cambuslang.

In addition to the 12 permanent clinics, 11 emergency clinics, including a mobile clinic, which were set up at the outbreak of war to serve outlying districts, continued throughout the year to cover the needs of the rural population. The following is a summary of

<sup>†</sup> Conducted by the staff of the County Public Health Department.

these clinics, showing their situation, the number of children treated, and the attendances made:—

Emergency Clinics.

Clinic.				Children treated.	Attendances made.
Blackwood		• • •	•••	255	893
Lesmahagow		• • •	• • •	322	1,203
Carluke		* * *		445	3,435
Carnwath	• • •	• • •	• • •	109	909
Lanark		• • •	• • •	201	1,096
Forth		•••	• • •	121	1,200
Stonehouse	• • •	•••	• • •	314	1,871
Strathaven	• • •		• • •	821	4,518
East Kilbride	• • •			397	2,202
Benhar		• • •		604	3,527
Mobile Clinic	• • •	* * *	• • •	150	1,019
•				3,739	21,873

In addition to the above figures a minor ailments clinic, staffed by a fully trained nurse, operates daily at Knowetop Special School. This serves the needs of all the children attending the school. The number of treatments during the past year was 10,079.

Treatment of minor ailments for Woodburn, Drumpark, and Dalton Special Schools is afforded at the minor ailments clinics at Hamilton, Coatbridge and Cambuslang respectively. The attendances of these children are included in the reports of these clinics.

A limited outbreak of ringworm of the head and body occurred in one school in the Coatbridge area.

In addition to the routine cases treated at the Minor Ailments Clinics, nearly 3,000 special cases were seen by the school staff.

#### B. DEFECTIVE VISION AND SQUINT.

The scheme of visual treatment has been fully explained in previous reports. The results of treatment during 1942-43 are given in Table VI. The examination and treatment of visual defects, squint, and other eye conditions is carried out by three part-time ophthalmic surgeons. They provide specialist services to all children referred to them by the school medical officers. The number of children taking advantage of this essential service continues to be well maintained. Two thousand two hundred and fifty-nine (2,259) children were examined and prescribed for. Of children who had previously had spectacles provided, 4,774 were re-examined to make sure that their glasses were suitable in all respects. The total number of attendances at the various visual clinics was 7,033. 1,973 children had spectacles prescribed for them, and 252 were treated in other ways. The ophthalmic surgeons also operate on cases of squint which are suitable for this form of treatment. They also, when requested, give advice on the treatment of eye conditions being conducted at the minor ailments clinics. The prescribing of glasses is not the only function of the ophthalmic surgeons. At the visual clinics many eve conditions, other than visual defects, are encountered. Suitable advice is given in these cases and, where necessary, hospital treatment provided. During the year the following conditions were seen at the ophthalmic clinics:—

Squint (convergent, divergent and alternating), 590; Corneal opacities, 73; Cataract, 28; Choroidal Retinal Changes due to Myopia or otherwise, 20; Keratitis, 11; Nystagmus, 19; Corneal ulcers, 2; Albinism, 4; Persistent Pupillary Membrane, 12: Optic atrophy, 1; Dislocation of Lens, 1; Detachment of Retina, 1.

#### C. Nose and Throat Operative Treatment.

The operative treatment of Tonsils and Adenoids is carried out at five clinics situated at Larkhall (Health Institute), Motherwell (Carnegie Health Institute), Douglas (Lady Home Hospital), Lanark (Lockhart Hospital), Biggar (Kello Hospital). These clinics continued to function throughout the year.

The number of children receiving attention continues to increase. This is largely due to recommendations from general

practitioners who have become familiar with the scheme and who avail themselves of the facilities offered more and more every year.

Both doctors and parents appreciate the shorter time of waiting for operation as compared with the delay experienced at the voluntary hospitals. The following summary shows the nature and numbers of the conditions treated at these clinics during the year.

#### Health Institute, Larkhall.

#### (Dr. R. A. GRAY.)

Number operated on for enlarged tonsils and adenoids	• • •	328
Number treated without operation		2
Number of cases of ear condition treated		11
Number of cases of nasal disease treated	• • •	6
		347
Number of attendances made by patients	• • •	1,196
Carnegie Health Institute, Motherwell.		
(Dr. R. A. Gray.)		
Number operated on for enlarged tonsils and adenoids	• • •	340
Number of attendances made by patients		930
Time occupied by surgeon—hours		92
Time occupied by anaesthetist—hours	• • •	61
Lady Home Hospital, Douglas.		
(Dr. R. A. Gray.)		
Number operated on for enlarged tonsils and adenoids		56
Lockhart Hospital, Lanark.		
(Dr. С. Е. Scott.)		
Number operated on for enlarged tonsils and adenoids		87
The Kello Hospital, Biggar.		
(Dr. C. E. Scott.)		
Number operated on for enlarged tonsils and adenoids		7

During the year four cases of mastoid operation were performed at the County Hospital, Stonehouse.

#### D. ORTHOPAEDIC TREATMENT.

The orthopaedic clinic, conducted by the county authorities at the County Hospital, Motherwell, has been of great service. Advice is given free, and, where necessary, special boots and appliances are prescribed. These are supplied by the Education Committee free or at a modified charge, depending on the financial circumstances of the parents. Children also receive advice and treatment at the Sick Children's Hospital and the Royal Infirmary, Glasgow. In 37 instances children were supplied with special boots or appliances by the Education Committee at a total cost of £172 13s. 8d., of which £41 10s. 3d. was recovered from the parents by instalments.

#### 7. DENTAL INSPECTION AND TREATMENT.

Dental inspection and treatment throughout the County was carried out on the same lines as in previous years. All children in attendance at the schools were examined at least once, and in some areas it was found possible to have a second inspection. The number of children who were examined in the course of routine inspection was 114,275, a slightly higher figure than in the previous year. Of these 33,339 boys and 31,181 girls were notified as requiring dental treatment, a total of 64,520 or 56 per cent. of those examined. This shows a slight fall from the previous year's figures. Evacuee children are included in these returns and are not shown separately since they are given the same opportunity for dental treatment as is afforded normally to children resident in the County. There is, as usual, considerable variation in the numbers accepting treatment in the various areas of the County. Country children or their parents seem to be more tooth conscious than their counterparts in the urban districts. This may be accounted for from the fact that it is more difficult to get dental treatment when a journey of many miles is necessary than when the dentist resides a few hundred yards away. Parents in the country act on the principle that a little forethought may save an arduous journey in the future. When facilities for treatment are near at hand it tends to produce a state of indifference and procrastination, and it is a small step to total neglect. Certain headmasters do attempt to counteract this tendency by insisting that all forms issued advising dental treatment shall be returned to them whether signed by the parents or not. In the latter case an explanation for refusing treatment is asked for, and if no reason is forthcoming the advantages of accepting treatment are stressed and another opportunity of reversing the original decision is given. This sometimes results in a considerable number of acceptances being added to the list. Such an attitude on the part of headmasters and teachers is to be highly commended.

The total number of children treated at the dental clinics shows a small decrease from the previous year. Of the 19,109 children treated, 8,933 received free treatment, and 10,176 were fee paying. This is a reversal of last year's figures and is due undoubtedly to the improved economic circumstances of the parents. The number of extractions of both temporary and permanent teeth is down, and there is a corresponding increase in the number of fillings carried out. This conservative treatment of teeth is a step in the right direction. Parents and children are too prone to desire the quick and painless extraction of an offending tooth rather than its survival by conservative treatment, and this is a frame of mind which can only be altered by timely advice and a firm stand on the part of the Dental Officers.

The following summary shows the dental treatment undertaken by the Dental Officers:—

Dental Officer.	No. of Children treated.	Extractions (temp. teeth).	Extractions (perm. teeth).	Fillings (Amalgam or Cement)	Other treatment (cleaning, scaling, etc.).
Mr. Beattie	3,029	3,815	741	1,253	644
Mr. Rankin	2,362	2,802	856	588	223
Mr. Watson	3,164	3,870	577	754	119
Mr. Weatherston	2,724	3,106	890	849	236
Miss Watson	2,204	2,998	457	859	528
Miss Hinshelwood	2,653	3,844	791	1,443	132
Mrs. Jackman	2,973	6,023	585	1,386	433
Total	19,109	26,458	4,897	7,132	2,315

Mr. Rankin also treated 8 pre-school children in the Burgh of Hamilton by arrangement with the Medical Officer of Health for the Burgh. Table V. shows the details of the results of dental inspection and treatment in the whole education area for the year, evacuee children being included.

The number of children treated at the Dental Hospital, Glasgow, under a general anaesthetic was 17.

#### 8. SPECIAL SCHOOLS AND CLASSES.

The Committee's four special schools situated at Hamilton (Woodburn Special School), Motherwell (Knowetop Special School), Coatbridge (Drumpark Special School), and Cambuslang (Dalton Special School) continued to function as in previous years. Of these schools Drumpark and Dalton are still being used for military purposes and the pupils attending receive instruction in the junior instruction centres at Coatdyke and Cambuslang respectively. This alternative accommodation, though restricting some of the activities normally pursued in the schools, notably treatment of minor ailments and visual defects, is satisfactory for all other purposes. Facilities for the treatment of these conditions is afforded at nearby Minor Ailments Clinics.

Deaf and deaf-mute children have accommodation in Townhead-Public School, Hamilton, in a portion of the building separate from the ordinary school. The children attending travel to the school from outlying districts by the ordinary public bus services. Children who for various reasons cannot be trained at Townhead School for the Deaf, Hamilton, are educated at the Royal Deaf and Dumb Institution, Edinburgh, St. Vincent's School for the Deaf, Tollcross, Glasgow, and Langside School for the Deaf, Glasgow.

The special schools play a very important part in the education of children who are handicapped either in a physical or mental way. Physically invalid children show great improvement after a term of attendance at these schools where measures to relieve their defects can be carried out coincident with suitable educational instruction. Parents often express their appreciation of the improved physical health of their children. Children with mental handicaps receive instruction suitable to their limited powers and, what is just as important, training in a social sense which helps them to adapt themselves better to the complexities of ordinary life. Those who, after prolonged trial, show no powers of learning or acquiring a social sense are reported to the General Board of Control for Scotland as ineducable children.

Another function of the special schools is the training of children afflicted with high degrees of myopia who are unsuitable for instruction in the ordinary schools.

Blind or educationally blind children are educated at the Royal School for the Blind, Edinburgh, or at St. Vincent's School for the Blind, Tollcross, Glasgow.

In certain cases of infirmity children are educated at East Park Home for Infirm Children, Glasgow, while children afflicted with epilepsy receive instruction and care at the Colony of Mercy for Epileptics, Bridge of Weir.

The following statistics show the number of children receiving instruction, the type of defect and the schools or classes where education is provided.

#### Physically Invalid Children.

At the four special schools	535
At Eastpark Home for Infirm Children, Glasgow	9
At Colony of Mercy for Epileptics, Bridge of Weir	4
Mentally Invalid Children.	
At the four special schools	389
At Birkwood Certified Institution, Lesmahagow	4
Nerston Child Guidance Hospital, East Kilbride	1
Deaf, Deaf-Mute or Educationally Deaf Childre	n.
At the School for the Deaf, Townhead, Hamilton	26
At Royal Deaf and Dumb Institution, Edinburgh	20
At St. Vincent's School for the Deaf, Tollcross	24
Blind or Educationally Blind Children.	
At the Royal Blind School, Edinburgh	9
At St. Vincent's School for the Blind, Tollcross, Glasgow	2

During the year 75 physically invalid children who had been attending the Committee's Special Schools recovered their health and resumed attendance at the ordinary schools. Forty physically invalid and thirty-four mentally invalid children obtained suitable employment on leaving school. Thirty-eight mentally invalid children who, after a period of trial, were found to be unfit to profit by further instruction in the special schools were reported to the General Board of Control for Scotland as ineducable.

### 9. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.

A, B, C, and E—
For arrangements see Report for 1938-39.

#### D. HOLIDAY CAMPS.

The six holiday camps provided by the Education Committee continued to function as in previous years. The camps are all situated in schools in the upper ward of the County. These schools are chosen both for their situational amenities and the facilities available for providing meals and other necessary services. The method of selecting the pupils by the headmasters of the supplying schools was the same as in previous years. The principle followed was to select pupils of low economic circumstances who, apart from the Education Committee's Scheme, were unable to have a holiday. The response in some schools was unexpectedly poor, and there was difficulty in getting the allowed quota of children to accept the offer of a holiday. There was no untoward happening in the running of the camps. The weather during most of the period was good and the children had a very enjoyable holiday. The following statement shows where the camps were situated and the respective children who were accommodated there:

New Lanark P. School (Children from four Special Schools); Lanark St. Mary's R.C. (R.C. Boys' Camp); Carnwath P. School (R.C. Girls' Camp); Biggar H.G. (Boys—1st fortnight; Girls—2nd fortnight); Douglas P. School (Girls' Camp); Leadhills P. School (Boys' Camp).

The number of children who were accommodated at the camp was 550, and the number of teachers who voluntarily acted as supervisors was 80.

The camps were visited each week by members of the medical staff.

## 10. OTHER ACTIVITIES IN RELATION TO THE HEALTH OF SCHOOL CHILDREN.

Of these the two most important are the provision of hot midday meals and the "milk-in-schools" scheme. Other activities are the provision of tonic food to certain selected cases, and the granting of boots and clothing in necessitous cases. A notable addition is the provision for convalescent treatment at Wiston Lodge.

#### SCHOOL MEALS SERVICE.

Prior to the outbreak of war one depot for the distribution of meals to school children was in existence in Lanarkshire. This was situated at Bellshill and catered for the requirements of a limited number of children in No. 6 area. In addition to supplying those needs it afforded useful information about costs, equipment, personnel required, and all the factors necessary to the successful running of similar depots which the Education Committee might deem it necessary to provide in the future. This scheme came into operation on the 15th of February, 1939, and continued until the outbreak of war. During that period a large number of meals was provided free to necessitous school children. A considerable number of children also participated on a payment basis. On the outbreak of war this depot closed down.

In October of 1941, the Department issued a circular to all Education Authorities outlining the measures to be taken to secure a high standard of nutrition among school children and calling upon those authorities to extend rapidly the schools meals service. Substantial financial aid was promised for the carrying out of these schemes.

In Lanarkshire, with a school roll in the region of 86,000, and a diversity of population areas ranging from thickly populated industrial districts to sparsely inhabited rural ones, the task of providing an adequate service was obviously one of considerable magnitude. That these difficulties are being overcome and an efficient service provided is a tribute to those who are carrying the

scheme to a successful conclusion. After an initial survey of the education area, it was decided to provide meals from central kitchens to serve the industrial areas and make arrangement for the provision of self-contained meals centres in the rural schools which could not be served from central kitchens. Those secondary schools which had dining facilities already in existence continued to function. The centres chosen for the cooking depots, 12 in number, were sited at:—

Bellshill.

Larkhall.

East Kilbride (Ministry of Food Centre).

Shotts.

Cambuslang.

Baillieston (Ministry of Food Centre).

Airdrie.

Coatbridge.

Wishaw.

Coltness (Ministry of Food Centre).

Motherwell.

Bothwellpark (Ministry of Food Centre).

A centre at Lanark was established later.

The self-contained meals centres were installed at the Committee's four special schools, also at Airdrie Central School, Airdrie Academy and Coatbridge Secondary School, and the others at suitable schools in the more sparsely populated rural areas of the County. In all twenty-one of these centres have been established. The meals are cooked on the premises and served to the children.

The following table shows the total number of schools in each school management area, with the number of schools receiving meals:—

S.M.C. Area.	No. of Schools	No. of Schools Receiving Meals.
No. 1 (Biggar, &c.)	18	4
No. 2 (Lesmahagow, &c.)	15	4
No. 3 (Lanark)	24	11
No. 4 (Larkhall, &c.)	21	16
No. 5 (Blantyre, &c)	9	8
No. 6 (Bothwell, &c.)	24	24
No. 7 (Shotts, &c.)	18	16
No. 8 (Cambuslang, &c.)	11	10
No. 9 (Cadder, &c.)	31	8
No. 10 (Burgh of Airdrie)	10	8
No. 11 (Burgh of Coatbridge)	14	4
No. 12 (Burgh of Hamilton)	12	9
No. 13 (Burgh of Motherwell and Wishaw)	19	. 19
No. 14 (Burgh of Rutherglen)	6	I
	232	142

The remaining ninety schools which have not as yet been included in the scheme will, in the near future, have the school meals service extended to them. When this is accomplished a very important provision in the prevention of undernourishment of the school children of Lanarkshire will have been attained.

The large cooking centres already in operation are capable of supplying 32,000 meals per day. This figure will be increased to 38,000 when the additional centre at Coatbridge comes into use.

The following table shows the number of school children partaking of hot dinner in school under the school meals scheme from February, 1942, to June, 1943:—

Date.				No. of Children partaking of Meals		
February, 1942	·			• • •	6,529	
May, 1942	* * *	•••	• • •	• • •	9,542	
October, 1942	• • •		• • •	• • •	11,403	
February, 1943			• • •	•••	15,992	
June, 1943	• • •				22,755	

The total number of school meals supplied from the inception of the scheme in February, 1942, to the end of June, 1943, was approximately 3,300,000.

The meals, which are provided at a charge of 4d., or in cases of necessity free, are much appreciated by the children. As varied a menu as is possible under war-time conditions is provided, due care being exercised to have, as far as possible, a properly balanced diet. The meals are prepared at the central kitchens and transported to the schools in specially constructed containers which ensures that the food will be hot on arrival. Each headmaster, immediately after the beginning of school each morning, ascertains how many children are taking dinner that day. This information is sent by telephone to the appropriate central kitchen which provides the required amount of food. This obviates waste. Meals are served in the school halls, or in other suitable places either in the schools or in outside buildings. An attempt is made to combine with the taking of the food an educational and cultural value. This is done by the singing of a suitable verse from a hymn before eating, and the correction of any uncouth manner or behaviour while at table. Members of the teaching staff supervise the meals and also partake of the food along with the children. No attempt is made to convert a pleasurable occasion into a solemn ritual. Conversation is allowed, but any unseemly conduct is corrected. The provision of knives and forks would enhance the cultural side of the proceedings as it is difficult to inculcate good table manners into children who are provided with a spoon only. The natural reaction is to overcome the inadequacies of the spoon by the use of the fingers and this is not desirable. Hands should be washed before eating In schools where it is impossible to feed all the children partaking of food at one sitting recourse is had to two or sometimes three sessions. This of necessity leads to some hurry and increases the difficulties of service and supervision, but is unavoidable at present. That these meals have been instrumental in maintaining a proper standard of nutrition amongst school children is beyond dispute. When the completed scheme is in operation it should ensure that nowhere in the education area need children go without a hot midday meal. Incidentally the working of the scheme has created a considerable amount of employment, as the following figures will show:—.

Number of persons employed at large Cooking	
Centres	148
Number of persons employed at School Meals	
Centres	43
Number of persons employed at School Dining	
Centres	598
	789

The milk-in-schools scheme continued to function as in previous years. The following table shows the number of children partaking of milk during the year, the consumption in the various months being contrasted with those of the preceding year. It will be observed that there has been a falling off in the numbers taking milk daily. This is probably accounted for by the rapid extension of the meals-in-school scheme, many of the children being unable, for various reasons, to participate in both.

Month.		1942-43	1941-42
September, 1942	 * * *	62,050	64,822
October, 1942	 • • •	59,027	63,670
November, 1942	 	61,103	65,839
December, 1942	 	60,096	66,597
January, 1943	 	58,405	64,406
February, 1943	 	59,577	64,960
March, 1943	 	59,981	63,479
April, 1943	 	64,068	62,413
May, 1943	 	61,089	65,891
June, 1943	 	57,778	62,207

Tonic food (Cod Liver Oil and Malt) was supplied to 37 necessitous children on the recommendation of the School Medical Officers. This is also a normal constituent of the diet of children attending the Committee's Special Schools. Free boots were supplied to 3,043 children, and, after medical examination, 31 children were granted free clothing. Children convalescing from debilitating illness or after operations for tonsils and adenoids, etc., are given the opportunity of a period of convalescent treatment at Wiston Lodge. Wiston Lodge is a country mansion situated in pleasant woodland adjacent to Lamington Station in the upper ward of the County. Originally it was acquired by the Department of Health for Scotland for the reception and treatment of diabetic children from all of the evacuation areas in Scotland. It was equipped to accommodate 70 children and placed under the supervision of the Public Health Committee of the County. As the number of diabetic children admitted fell far short of the accommodation provided it was agreed to utilise the remaining beds by taking in evacuee children who were "bed wetters," and later on when numbers again decreased evacuee children whose foster parents needed temporary relief from their billeting obligations. The number of children admitted under the latter condition was small, and it was then proposed to utilise the available accommodation as a convalescent centre for debilitated school children. resident in the County and Burghal areas. This was extended to children, convalescing after tonsillectomy and other operations who required a rest and nursing care. School children up to the age of 13 are normally admitted for a period of one month in cases of convalescence from illness and for two weeks following removal of tonsils and adenoids. The scheme has proved to be a popular one, and increasing numbers of children are deriving great benefit from their stay at Wiston Lodge. The children are selected by the school medical staff, cases of mental deficiency and contagious or infectious disease being debarred. Educational facilities are provided. Residence at and transport to and from Wiston Lodge are provided free, the cost being borne by the Education Committee of the County. There is no doubt that a period of residence at this convalescent home is of great value in restoring to health children who, through illness or operation, are in need of rest and nursing care.

During the period under review from 1st August, 1942, to 31st July, 1943, seventry-three children suffering from general debility

following illness, and twenty-four convalescing after removal of tonsils and adenoids, a total of 97, were admitted to the home.

Intensive Courses in First Aid and Home Nursing.

These courses were held during the latter part of the summer in the period between the completion of the leaving certificate examinations and the summer holidays.

The classes in first aid and ambulance work were as popular as in previous years. As these classes have had their origin since the outbreak of the present war, it is impossible to tell whether their popularity is due to the circumstances of the times or to a genuine interest in the subject itself. It is to be hoped that the latter proves to be the determining urge and that the course may find its place in the curriculum of the schools. Of the value of knowledge acquired at such classes there is no doubt at all provided it is applied with a due sense of responsibility and caution. The classes are affiliated with the St. Andrew's Ambulance Association. Examinations are held at the termination of the course, and certificates and medallions presented to successful students.

The following tabulated statement shows the schools which had courses during the year, the number of pupils attending, the number presented at the examination, and the certificates and medallions gained.

Intensive Course in First Aid and Ambulance Work. (Session 1943)

School. en	No. of rolled Pupils.	Pupils presented for examination.	Pupils who gained Proficiency Certificates.	Pupils who gained Medallions.
Bellshill Academy	16	15	9	5
Biggar High	15	15	9 .	3
Coatbridge Secondary	51	40	30	-
Elmwood Secondary, Bothwell	35	29	14	15
Hamilton Academy	41	35	33	2
Lanark Grammar	32	24	16	8
Larkhall Academy	. 35	25	18	5
Our Lady's High School, Motherwell	40	40	· 13	27
Uddingston Grammar	24	22	22	_
Wishaw High	33	32	32	
Dalziel High	103	98	85	
Totals	425	375	281	65

The following tabular statement shows the number of pupils who took the course in Home Nursing at the various schools:—

Intensive Course in Home Nursing. (Session 1943)

School.	No. of Pupils enrolled.	No. of Pupils presented for examination.	No. of Pupils who passed examination.	No. of Pupils who gained higher awards.
Coatbridge Secondary	17	17	13	_
Elmwood Secondary, Bothwell	35	27	27	14
Hamilton Academy	17	17	17	3
Totals	69	61	57	17

The three schools enumerated above were the only ones whose number of pupils desiring to take the course justified the running of a class. Four secondary schools had no applicants and in three others the numbers were inadequate. During session 1942, six schools had a course. There has been a progressive diminution which appears to be contrary to the general opinion that home nursing is a subject in which girls are naturally interested. In contrast to the numbers who enroll for First Aid and Ambulance Work it is remarkable. The fact is that Sick Nursing is a calling. and unless a girl has a definite urge towards it she regards it either with indifference or decided distaste. Perhaps the association of sick nursing with unpleasant experiences of illnesses at home has an adverse affect. There is also the fact that girls in secondary schools have a definite aim in life and unless this happens to be nursing they are not keenly interested. Whatever the real reason may be it is quite apparent that Sick Nursing has a limited appeal.

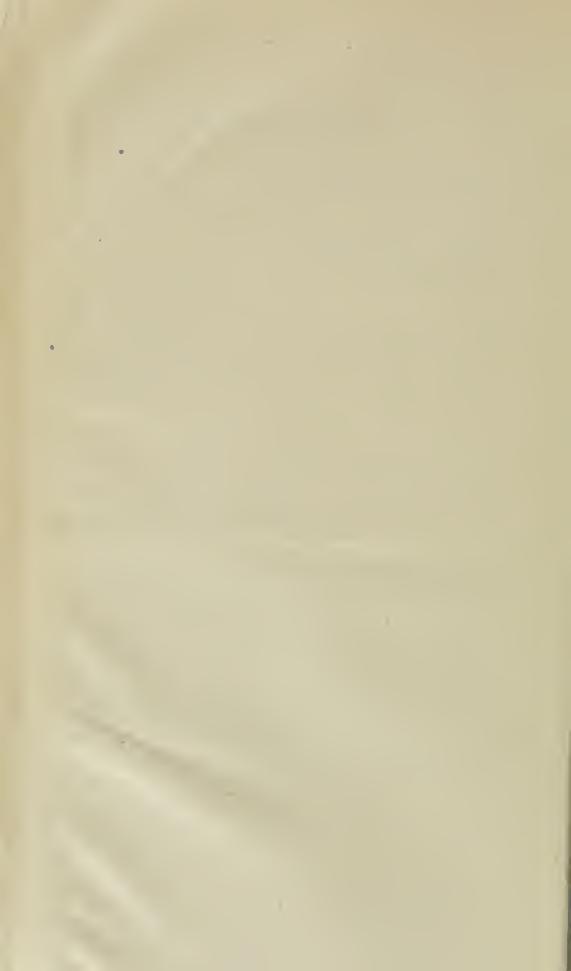
#### TABLE I. (1942-43).

Total number of children examined at A. Systematic Examinations:—

A. SYSTEMATIC EX	AMINATIONS	:				
Ordinary Second Third	ts	•••	•••	•••	•••	8,050
Schools Second	Age Group	* * *	• • •	•••	•••	8,344
(Third A	Age Group	•••	• • •	•••	•••	8,738
Secondary Schools Age Gr			•••	•••	• • •	466
		Total				25,598
Government and Vo						317
			•••	•••	• • •	
		Grand	Total	•••	•••	25,915
B. OTHER EXAMINA	ATIONS :—					
Special (Non-ro	utine) Cases	•••	•••	•••	• • •	5,239
Re-inspections				•••	• • •	9,504
	•					
		Total	• • •		***	14,743

Number of individual children inspected at systematic (routine) examinations who were notified to parents as requiring treatment (exclusive of uncleanliness and dental caries):—

Ordinary Schools	Entrants Second Age Group Third Age Group		•••	•••	•••	1,721 - 2,027 - 1,678
Secondary Schools	Age Group	•••	• • •	•••	• • •	44
6	t and Walantawa Fr	Total	•••	•••	•••	<b>5,47</b> 0 50
Governmer	nt and Voluntary Ev		•••	• • •	•••	
		Grand T	Cotal	400	• • •	5,520



#### SYSTEMATIC EXAMINATIONS (1942-43).

- 5		ory.	tory.	Unclean Liness,				Ski	IN.			MAI					NASO-	PHARYN	x.					Ey	ES.					EA	RS.			Speeci	ı. [	Men	TAL AND	Nervous	Condi	TION.	-	HEART	t.		Lungs,			DEFORM	TIES.		octs.
	.d.	ntisfac	entisfac	LINESS,		НЕА	ND.			Вору.		TRIT	ION.			Nose.		THROA	т.	GLAND	s.	1	Externa	L DISEAS	SES.	1	VISUAL ACUITY.	Di	SEASES.	D	EFECTIVE	HEARING.					1 3	uble).	table.	ffcult.				nitis.				Acç	UIRED.	ase.	or Def
4_	No. Examine	Clothing Uns	Footgear Un	Head.	body.	Kingworm.	Other	Luseases.	Impetigo.	Scabies.	Other Diseases.	Slight.	Bad.	Oral Sepsis.	For observation.	For Treatment (Adenoids).	Other Conditions.	observation (Tonsils).	Treatment (Tonsils).	For Observation.	For Treatment.	Blepharitis.	Conjunc- tivitis.	Corneal Opacities.	Squint.	Diseases.	For	Otorrhoea.	Other Diseases.	Grade I.	Grade IIA.	Grade IIB.	Grade III.	Defect. Artic.	Stammering.	Backward.	M.D. (Educab	M.D. (Ineduca	Nervous or Uns	Behaviour Dia	Congenital.	Acquired.	Functional.	Chronic Broncl	T.B. Suspected	Other Diseases	Congenital.	Inf. Paral.	Rickets.	Other Causes.	Other Diseases
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$														0.3		4,140 99·9 3,899 99·8	0·1 7 0·2	-	- 1	14	1	5	5	4 –	-	7	2 2	2 24		1·5 41	-	173 4·2 113 2·9		4 0·1 2 0·05	0·99   0· 19   ·	12 ·3 ·11 ·2 0·1	4 114 2·7 100 2·56														
ALL AGES														15 0·3 14 0·3	0·09 1 0·02	30 0·7 15 0·4 0·	20 — ·5 — ·14 ·3 0·0	$ \begin{array}{c cccc}  & 118 \\  & 2.8 \\  & 92 \\  & 2.2 \end{array} $																																	
Boys 4,144 212 22 3 88 67 7 42 24 3 34 560 149 120 13 102 144 127 247 813 399 844 10 67 18 2 129 21														3 0.07 6 0.1	27 0·6 12 0·17 0·	21 — 5 — 11 — 25 —	87 2·02 135 3·																																		
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$															1 0·36 1 0·5	0·7 		2 -	0·7 5 2·6																																
Boys Percentage Girls Percentage	12,945 12,653		1.04	0·9 3 .,689	455 3·5 377 398 (	7 0.05 4 0.03 0.03	83 6 0.4 83 66 0.3	63 48 0- 44 34 0-	6 0.7	95 17 7 1·3 42 17 33 1·3	36 3·2 4 330	371 2·8 389 3·07	28 0·2 24 0·19	155 1·2 228 1·8	304 2·3 197 1·56	255 1·9 211 1·67	353 2	,031 1,	,091   1	,990 5·4 ,738 3·7	26 0·2 27 0·21	236 1·8 219 1·7	50 0·38 44 0·34	7 0·05 12 0·09 2	278 0-15 0 259 0-05 0	45 1,2 ·35 9· 58 1,4 ·46 11·	10 65 6 5· 08 73 12 5·8	99 0 0.70 8 90 0.7	66 3 0.5 32 0.25	12,892 99·6 12,605 99·6	50 0·38 43 0·34	0·01 0 4 0·03 0	1 -007 1 -008	65 0·5 36 0·28	21 )-16 7 )-05	13 0·1 0 14 0·11 0	97 ·75 31 ·24 0·	34 26 14 11 0·0	2 2 01 0·1 2 0·0	20 15 007 007	2 1 1 0.08 3 10 2	1 73 8 0.56 0 77 8 0.6	137 1·05 130 1·02	111 0·85 70 0·55	5 0·04 4 0·03	321 2·5 193 1·5	36 0·3 28 0·22	13 0·1 9 0·07	98 0·7 0· 47 0·37 0·	53 4 0.0 38 3 0.0	321 3 2·5 9 332 7 2·6
							П										564	EDAIM						*	Infant	children					CDO																				

GOVERNMENT EVACUATION SCHEME—CHILDREN EXAMINED IN ROUTINE AGE GROUPS.

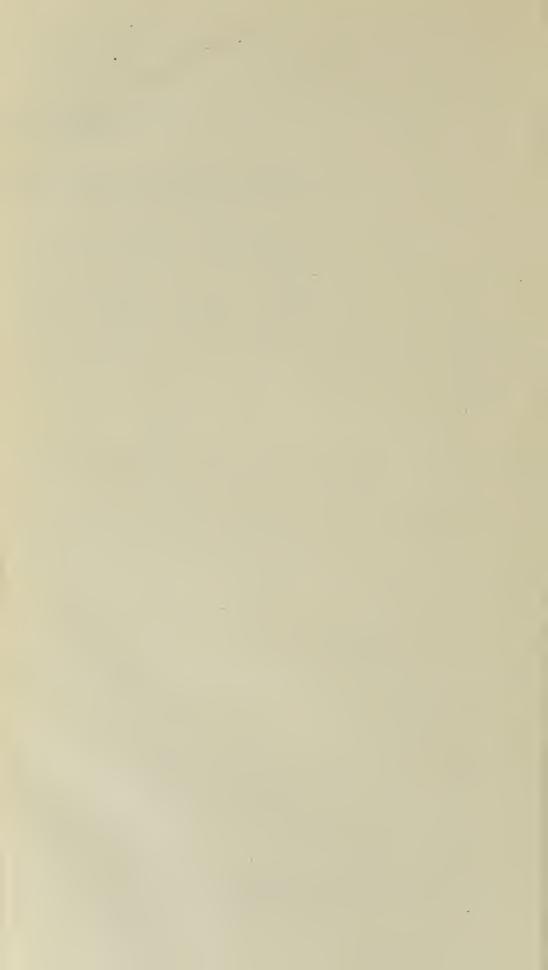
si Boys	141	3   -	1	3	_	- 1	1   _	_	6		1   —		1	1	8	27	7 19	2	1	1	2	3	1	15	8	_	141	ıl —	_   -	_	1   -	-	1		-	1	$/\parallel -/$	1	1	4 -	- 3	3 1	1 - 1 -		1 - 1	7
Percentage		2.1   -	0.7	2.1	-	— 0.7		_	4.2	_   2.8	1 —		0.7	0.7	5.7 19	12 4	9 13.5	1.4	0.7	0.7	1.4	2.1 0	-7 10-	6 5.7	_	-	100.0		_   -	- 0	)-7   -	-	0.7	-	- 0.7	_	1 -	0.7	0.7   2.4	8 -	—   2·1 ]	0.7	4 - 17		A = V	4.9
< Girls	176	3	1   8	1		2   —	-	2	7	8    -	1		-	4	10	32	7   19	2	1	1	_		-	18	7 -	-	176	6 —	_   -	-    -	_   _	-	1	_	-   -		-	1	1	1 -	—   2	1 - /	$I - I_J$	2 1		3
- Percentage	į i	1.7   0.6	3    4.5	0.6	- 1	l·1   —	- 11 -	1.1	3.9	8 -	0.6	_	ii — I	2.3	5.7   18	2 3	9 10.8	1.1	0.6	0.6	-	<b>-</b>   -	— [] 10·	2 3.9	-	_	100.0		_   -	_    -	_   _	-	0.6	-	-   -	-	-	0.6	0.6 0.6	6 -	- 1.1		-   1;	1 0.6		1.7
<		- 1	H										1																						1.		/	4				41	1 1		11 1	A.
TOTAL EXAMINED	317	1	- 1				11								11																						/	4							4 1	d .
	1 11	!							1						- 1				1																			A = A								
												-				_		<del></del>									-																			



# TABLE III. (1942-43)

# SYSTEMATIC MEDICAL EXAMINATIONS.

Classification.	Enti	RANTS.	SECOND A	AGE GROUP.	THIRD A	GE GROUP.	SECONDA AGE	RY SCHOOLS GROUP.	Т	OTAL.
	No. of Children.	Per- centage.	No. of Children.	Per- centage.	No. of Children.	Per- centage.	No. of Children.	Per- centage.	No. of Children.	Per-
I. Children free from defects,	3,370	41.86	3,322	39.81	4,136	47.33	255	54.72	11,083	centage
II. Children (otherwise free from defects) who suffer from:—  (a) Defective Vision not worse than 6/12 in the better eye, with or without glasses;  or (b) Conditions of world.	21	0.26	1,034	12:4	1,189	13.6	92			43.29
or (b) Conditions of mouth or teeth requiring					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	100	92	19.74	2,336	9.13
treatment, (c) Both (a) and (b),	121 —	1.50	70 26	·84 ·31	50 12	·6 ·13	5	1.07	246 38	.96 .15
Total,	142	1.76	1,130	13.55	1,251	14.33	97	20.81	2,620	$\frac{10.24}{}$
III. Children suffering from ailments (other than those mentioned in II.) from which complete recovery is anticipated within a few weeks,	3,127	38·85	2,569	30.79	2,197	25.14	76	16:31		
IV. Children suffering from defects where (a) Complete cure may ultimately be ex-		· ·		?		2011	70	10.31	7,969	31.13
pected, (b) Improvement only	1,302	16-17	1,156	13.85	937	10.72	22	4.72	3,417	13.35
may be expected,	109	1.36	167	2.0	217	2.48	16	3.44	509	1.99
Total,	1,411	17.53	1,323	15.85	1,154	13.2	38	8.16	3,926	·15·34
Total No. of children Examined,	8,050	100%	8,344	100%	8,738	100%	466	100%	25,598	100%



#### TABLE IV. (1942-43).

# RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.

_				
	Disability.	At Ordinary Schools.	At Special Schools or Classes.	Tota!
1.	Blind,	. —	11 .	13
2.	Partially sighted—  (a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition,  (b) Other conditions of the eye, e.g., cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an	2	32	3-4
	ordinary school,	5	21	26
3.	Deaf— Grade IIA, Grade IIB, Grade III,	104 13 3	5 83	104 18 86
4.	Defective Speech—  (a) Defects of articulation requiring special educational measures,  (b) Stammering requiring special educational measures,	_ 	11	11
_				
0.	Mentally Defective (Children between 5 and 16 years)—  (a) Educable (I.Q. approximately 50-70),	98	259	357
	(b) Ineducable (I.Q. generally less than 50),	2		2
6.	Epilėpsy—  (a) Mild and occasional,	12	17	29
	(b) Severe (suitable for care in a residential school),	_	2	2
7	. Physically Defective (Children between 5 and 16 years)—			
	(a) Non-pulmonary tuberculosis (excluding cervical glands), (b) General orthopaedic conditions, (c) Organic heart disease, (d) Other causes of ill-health,	13 53 199 124	37 91 52 256	144 261 280
8	3. Multiple Defects— (a) (b)		*171 †105	1771 1Q5
	The state of the s	defects.		

<sup>\*</sup> Mental Defect plus one or more physical defects.

<sup>†</sup> More than one physical defect.



TABLE V.

### DENTAL INSPECTION AND TREATMENT (1942-43).

GEMENT							NU	MBERS EX	AMINED,								Notified.		1	1	Number of										<del></del>			
LBA,	5 yrs.	6 yrs.	7 yrs.	8 yrs.	9 yrs.	10 yrs.	ll vrs.	12 yrs.	10	T								TOTAL,	Requiring	Number of Pupils	Attend- ances	EXTRA	ACTIONS.					_ 0	THER TMENT,	Number of General		SIONS.	CLASS	SIFICATION PATIENTS.
0. 1	195	218	201	196		<del></del>			13 yrs.	14 yrs.	15 yrs.	16 yrs.	17 yrs.	18 yrs.	. Total,	Boys,	Girls,		Treatment	Treated.	made for Treatment.	Temp.	Perm.	Amal	,	Cem				Anaes- thetic	Treat	T	Free	
9	400	,			189	189	169	169	108	51	14	8	6	1	1,713	359	336	695	40.57	442	457	-		Temp.	Perm,	Temp,	Perm.	Temp.	Perm.	Cases.	Treat- ment.	Inspec- tion,	Treat- ment,	Fe-
" -		394	389	395	410	404	402	378	294	58	12	2			3,538	772	747	1,519	1		1 1	527	130	_	186	-	3	-	131	_	41	19	185	25
,, 3	549	623	686	686	710	656	707	639	653	171	37	24		6	0.740				42.93	911	951	1,130	186	_	339	-	11	_	151	_	90	26	457	
,, 4	998	942	976	987	1,051	970	953	915	799	203			°	F	6,149	1,380	1,340	2,720	44.23	1,676	1,752	2,158	425	_	698	_	16	_	362	_	140	20		45
,, 5	721	705	731	688	715	755				203	61	33	3		8,891	1,716	1,812	3,528	39.7	1,024	1,037	1,274	411	_	179	_	71				148	41	834	84
,, 6	1,246	1,168	1,208	1,212			660	607	646	.83	-	_	- 1	+	6,211	4,306	2,106	6,412	66.0	1,077	1,196	1,160	390	_	274				15	_	134	64	555	46
_	.=.				1,195	1,252	1,232	1,067	930	226	65	60	25	13	10,899	3,687	4,068	7,755	70.9	2,296	2.815	3,318				_	15	_	43	_	140	41	607	470
" '	473	589	545	597	541	591	583	463	419	52	-	_	_	ш	4,852	1,760	1,757	3,517	72.4				689	_	646	498	123	-	132	2	298	80	1,002	1,294
,, 8	928	978	894	980	959	935	958	756	630	109	18	1	_		8,146	3,020				1,252	1,368	2,103	320	9	313	111	131	- 1	120	2	148	39	587	665
,, 9	1,275	1,243	1,357	1,308	1,298	1,454	1,311	969	726	144	10						2,868	5,888	72.0	1,170	1,278	1,395	364	1	330	-	4	_	109	_	164	58	559	61
., 10	1,039	1,152	1,001	1,026	1,023	998	1,080	1.010			10	2	-	T	11,097	2,653	2,656	5,309	47.8	2,384	2,467	3,537	404	18	517	44	120	_	155	6	298			1 40
,, 11	659	915	697	674	724			1,018	1,059	371	113	51	11	3	9,945	1,769	1,786	3,555	35.7	1,413	1,430	1,767	233	9	317	2	18					92	952	1,432
,, 12	1,206	1.300				701	807	832	796	' 301	86	30	12	4	7,238	2,951	2,836	5,787	77-9	1,677	1,890	3,366	367	13	463	04	224	1	97	_	154	35	584	829
1	1,200	,	1,166	1,262	1,256	1,332	1,312	1,501	1,309	401	208	169	89	17	12,528	2,393	2,368	4,761	37.9	1,100	1,111	1,277				84	224	_	252	7	240	56	954	723
,, 13	1,774	1,518	1,613	1,616	1,529	1,624	1,661	1,817	1,710	416	192	114	47	15	15,646	3,924	3,675	7,599	48.0				333	_	257	_	36	-	208	-	148	88	602	498
,, 14	677	677	704	700	642	778	803	854	929	321	130	76	31		7,422				1	1,972	2,377	2,644	397	4	656	30	92	7	489	-	297	102	745	1,227
al	12,140	12,422	12,168	12,327	12,242	12,639	12,638	11,984	11,008	2,907	946	570		N T	-	2,649	2,826	5,475	74.0	715	827	802	248	2	263	-	5	-	84	_	93	42	310	405
								12,002	-,,,,,,				232	52	114,275	33,339	31,181	64,520	56.0	19,109	20,956	26,458	4,897	56	5,438	769	869	7	2,308	17	2,396	785	8,933	10,176

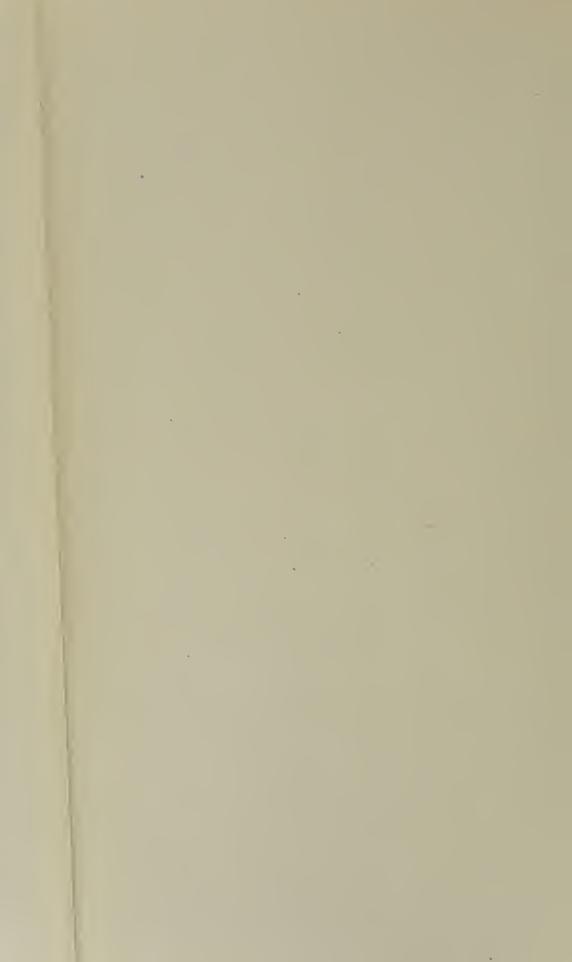


### TABLE VI. (1942-43).

### VISUAL TREATMENT.

Showing number of children who received full ophthalmic examination, number re-examined, and the number for whom spectacles were prescribed or who were otherwise treated.

TREATMENT CENTRE.	Number of Children Examined.	Number of Children Re-examined.	Total Attendances.	Number for whom Spectacles were prescribed.	Number Treated otherwise or Advised.	Cases uncompleted and Cases not requiring Treatment.
Dr. John A. Mortimer.  Blantyre	87 49 39 5 134 87 57 35 93 162 17	286 172 143 15 234 297 204 126 261 295 104	373 221 182 20 368 384 261 161 354 457 121	81 42 34 5 105 81 44 27 82 140 13	$ \begin{array}{c} 6 \\ 7 \\ \hline 5 \\ \hline 29 \\ 6 \\ 12 \\ 8 \\ 11 \\ 22 \\ 4 \end{array} $	
Dr. H. SOMERVILLE MARTYN. Abington	2 240 55 149 25 137 21 12	$\begin{array}{c} 4\\ 502\\ 101\\ 211\\ 31\\ 191\\ 31\\ 53\\ 221\\ \end{array}$	6 742 156 360 56 328 52 65 298	2 210 43 138 18 120 11 9 68	29 8 8 4 9 8 3 8	$ \begin{array}{c}  - \\  11 \\  4 \\  3 \\  3 \\  8 \\  2 \\  - \\  1 \end{array} $
Dr. James Hill. Coatbridge Hamilton Motherwell	307 201 268 2,259	526 463 526 4,774	794 664 794 7,033	242 188 242 1,973	26 13 26 252	1 - 34



MINOR AILMENTS.

TABLE VII. (1942-43)

SHOWING (a) NUMBER OF CHILDREN TREATED AT EACH CLINIC; (b) TOTAL ATTENDANCES MADE; (c) NATURE OF AILMENT FROM WHICH THE CHILDREN SUFFERED.

	AIR	RDRIE CLI	INIC.	BAILI	LIESTON	CLINIC.	BEL	LSHILL	CLINIC.	BLA	NTYRE C	LINIC.	CAMI	BUSLANG	CLINIC.	COAT	TBRIDGE	ÇLINIC.	HAN	ilton (	CLINIC.	LAR	RKHALL (	CLINIC.	MOTH	HERWELL	CLINIC.	RUTH	ERGLEN	CLINIC,	SH	OTTS CLI	INIC.	WIS	SHAW CL	NIC.
	Boys.	Girls. A	Total Attendance.	Boys.	Girls.	Total Attendance.	Boys.	Giřls.	Total Attendance.	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance.	. Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance.	Boys.	Girls, A	Total ttendance.
DISEASES OF THE EYE— Blepharitis,	88 15 1 2 - - 10 - 3	84 22 4 10 3 	1,421 124 51 216 35 — 105 — 13	22 7 2 1 — 7 — 2	21 4 2 — — — — — — — — — — — — —	682 42 26 33 — 47 — 44	64 32 1 — — — — 12 — 2	59 21 — — — — — — — — — — 12 —	1,050 343 5 — — 59 — 6	27 23 2 1 1 - 11 - 5	39 13 2 4 1 3 10 -	756 303 35 143 11 44 56  44	42 36 3 4 1 	55 51 1 2 1 1 1 15 —	744 667 4 66 9 19 103 —	104 40 3 18 1 —	95 34 4 24 - 2 26 - 4	2,425 237 86 251 15 28 189 	81 29 1 3 2 - 11 4	36 27 1 1 4 — 11	992 408 4 84 24 — 104 — 9	16 8 1 1 1 - 5 - 3	19 16 2 1 2 	371 155 5 25 6 40 4	28 13 1 — 1 1 4 —	19 9 1 - 2 - 2 1	512 108 11 	30 22 1 - 2 - 15 - 6	37 27 2 - 1 - 22 - 6	622 311 12 - 3 132 - 36	12 1 - - - 1	3 1 - - - 2 -	186 40 — — — — 8 —	20 10 1 1 · 1 2 3 5 1	34 8 2 2 3 ———————————————————————————————	760 97 29 78 28 24 108 2 11
Total,	119	150	1,965	41	40	834	111	93	1,463	70	74	1,392	114	131	1,722	179	189	3,267	81	80	1,625	35	48	606	48	34	702	76	95	1,116	14	6	234	44	67	1,137
DISEASES OF THE SKIN— Impetigo Contagiosa, Eczema, Alopecia Areata, Scahies, Pediculosis Capitis, with Impet. Contag., Pediculosis Capitis, Dermatitis Sehornhœica, Wounds and Septic Sores, Psoriasis,	232 232 2 3 445 4	220 7 1 225 16 5 4 305 5	2,601 116 34 3,149 25 8 55 3,517 63	80 222 3 1119 1 1 8 225 3	59 14 1 127 11 2 8 156 1	834 257 25 2,049 36 3 62 1,801 23	150 1 3 81 3 	119 	1,280 3 17 365 26 9 820 2,382 22	182 19 2 148 2 	87 13 2 140 15 1 8 215 4	1,359 305 76 1,060 38 4 145 2,169 39	170 17 5 *58 1 3 7 553 3	90 19 3 67 7 13 6 305 3	1,104 398 66 147 13 17 42 2,804 25	360 16 — 277 2 — 6 508 15	220 19  215 13 9 2 285 6	2,689 240 3,084 34 9 37 3,030 116	294 15 2 332 12 1 — 340 2	162 13 2 329 22 3 1 220 2	2,879 325 69 4,417 203 37 5 2,865 21	134 7 1 142 1 — 261 1	119 5 2 180 3 1 160 2	1,524 110 8 1,962 12 1 2,192 23	143 23 1 217 1 1 12 150	100 17 3 169 3 	1,178 210 32 2,644 7 	146 17 2 94 5 1 6 450	108 15 5 108 14 2 14 349 2	1,398 230 192 639 29 4 146 3,835 39	39 — 85 — 63	$     \begin{array}{r}       37 \\       \hline       1 \\       \hline       94 \\       \hline       5 \\       \hline       1 \\       \hline       65 \\       \hline       \hline       0     \end{array} $	249 2 1,026 7 2 525 	139 23 118 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	79 26 1 98 2	889 442 9 986 6 241 1,561
Other Skin Diseases,	68	55	520	26	28	309	57	67	586	46	40	410	177	165	1,857	55	50	393	117	102	2,093	70	66	778	38	57	292	101	133	1,292	5	900	125	40	46	254
Total,	1,018	843	10,088	488	407	5,399	627	595	5,510	766	525	5,605	994	678	6,473	1,239	819	9,632	1,115	856	12,914	617	538	6,610	585	480	6,054	823	750	7,804	192	209	1,936	445	383	4,388
DISEASES OF THE EAR— Chronic Suppurative Inflammation, Ceruminous Collection, Chronic Catarrh, Other Diseases,	60 19 5 1	55 15 8 2	1,178 40 100 15	$\begin{array}{c c} 20 \\ \frac{1}{2} \end{array}$	18 1 1 1	627 6 4 11	38 5 1 2	$\frac{26}{3} - \frac{2}{2}$	$\frac{540}{55} - \frac{1}{4}$	28 3 4 —	15 1 -3 1	495 23 31 6	26 11 10 5	30 10 4 4	508 74 45 14	65 4 18 1	40 5 16	2,973 18 270 13	41 1 3 1	27 2 1 2	877 10 16 23	20 1 6 —	21 8 1 —	501 68 27 —	20 1 1 6	$\frac{11}{1}$	303 6 4 41	26 4 3 5	20 8 3 12	679 33 17 43	6 — —	3 	199  	27 6 2 7	20 2 -3	740 18 3 68
Total,	85	80	1,333	23	21	648	45	31	599	35	20	555	52	48	641	88	61	3,274	46	32	926	27	30	596	28	15	354	38	43	772	6	3	199	42	25	829
DISEASES OF THE NOSE— Nasal Catarrh Nasal Obstruction,	24 —	15 1	442 2	7 1	7	115 4	$\frac{4}{2}$	3 3	37 102	17 7	4	202 74 ·	50 7	38 7	1,078 282	20	15 1	346 7	17 15	7 10	- 349 296	8 14	16 18	375 498	6 2	. 3	77 15	18	13 2	211 47	_	=	_	6	3	61
Total,	24	16	444	8	7	119	6	6	139	24	5.	276	57	45	1,360	21	16	353	32	17	645	22	34	873	8	3	92	22	15	258	-	_		6	3	61
Ringworm of Head, Ringworm of Body,	2 4	-8	22 46	5 1	1 3	18 39	1 2	=	1 7	2		27	1 4	1	6 7	35 51	3 45	265 511	1		17	2 2	1	45 35	1		10		_	2	_	=	=	_	1	13
Total,	6	8	68	6	4	57	3	_	8	2	2	27	5	2	13	86	48	776	1	2	17	4	1	80	1	1	10	2		2					1	13

<sup>\*</sup> School Nursing Staff also treated 115 Boys and 123 Girls, who made 1,147 attendances, at The Health Institute, Camhuslang.



## TABLE VIIa. (Supplementary), 1942-1943.

# MINOR AILMENTS (Treatment at Emergency Clinics).

		EY	E DISE	ASES.	SI	KIN DISE	CASES.	EA	R DISE.	ASES.	DISE	ASES OF	F NOSE.
CLINIC.		Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.
Blackwood	•••	5	13	56	120	106	757	2	7	61		2	10
Lesmahagow	•••	7	5	42	186	117	1,104	5	1	56	1		19 . 1
Carluke	•••	15	30	796	226	158	2,381	8	7	197	1	_	61
Carnwath	•••	10	5	224	44	43	576	5	2	109	_		
Lanark	•••	13	12	256	96	72	772	4	4	68	_		_
Forth	•••	7	23	441	48	36	660	2	5	99	_	_	_'
Stonehouse	•••	6	7	142	142	139	1,486	7	11	221	2	_	. 22
Strathaven	•••	13	33	382	445	315	3,894	4	9	198	_	2	44
East Kilbride	•••	12	14	168	211	153	1,953	2	3	62	1	1	19
Benhar	•••	36	39	802	284	226	2,319	6	10	334	3	_	72
Mobile Clinic	•••	9	12	272	73	45	637	7	4	110	_	_	_
Totals		133	193	3,581	1,875	1,410	16,539	52	63	1,515	8	5	238

Total number of children treated ... ... ... ... ... 3,739

Total number of attendances made ... ... ... ... ... ... 21,873



#### TABLE VIII (Supplementary).

### SHOWING THE REMEDIAL MEASURES INSTITUTED.

					CLE	EANLIN	ESS.			1		Co	DNDITI	ON OF	SKIN.					No	OSE,		THR	OAT,		_			1		7					T		<del></del>	7		T			_	-		1	
. schoor	Clot an Foot	id		Head				Body		)								Nut	RITIO	N:	asal					Lymp Glar	hatic	Externa Eye Disease	al	Squint.		Vision.	Ea Disea	ases,	Hearing	. н	cart,	Lung	s.	Nervous System	T cı	uber- 1losis	Oth	ner		on.	9	
MANAGEMENT COMMITTEES.			Nits a Dirt	nd y.	Lice.	. N	lits an Dirty	nd .	Lice.	Ir	npetig	o. Rii	ngwor	m. Sc	abies.	Dis	ther eases.			Obs	truc- , etc.	Ton	nsils.	Ader				Discase					Wax,	etc.		1			V	System.	mo	on-Pul- nary).	Condit	tions	mber of Notified.	f Childr Attenti	ber of Notifie	litions
	Notified.	Remedied.	Notified.	Remedied.	Notified.	Remedied.	Notified.	Remedied.	Notified.	Remedied.	Notified.	Notifod	Domodiad	Notified.	Remedied.	Notified.	Remedied.	Notified.	Remedied.	Notified.	Remedied.	Notified.	Received Medical Attention.	Notified.	Remedied.	Notified.	Remedied.	Notified.	Kemedied.	Notified.	Notified.	Received Medical Attention.	Notified.	Remedied.	Notified.	Notified.	Remedied.	Notified.	Remedied,	Notified.	Notified.	Remedied.	Notified.	Remedied.	Total Nun Children D	Number of Children Receiving Attention	Total Number of Conditions Notifie	Total Cond Remedied.
Number 1	1	-	7	2	4	2 -	-   -	-	- -	-11 -	-   -	-  -	-  -	- 11	5	2	-	-	-	1	-	16	6			_	-1	_ [ _		3 3	3   28	3 16	1						1			1					_	
,, 2	12	7	21	5	2	2	7	2	- -	- -	8	4 -	-   -	- 43	28	23	13	1	J –	6	5	65	24	15	8	4	_	5	3	9 8	5 28	3 17	5	2	2 _			3	9			1	8	1	82	29	83	35
,, 3	15	3	44	10	13	2 1	13	5	- -	-	2 -		7	7 60	34	10	3	1	\ -	_	-	77	24	31	8	7	3	7	2	13 9	9 108	3 72	7	3	11 -	. 8	9	4			1		13	-	213	110	273	134
,, 4'	10	3	54	20	11	5	9	5	_   -	-   1	12	6	1	1 84	59	31	15	I	-	10	4	134	73	31	23	4	2	14 1	0 :	20 11	101	54	16	9	3 9	7	6	13	6	2	_		30	.,,	288	164	445	196
,, 5	90	39	82	24	15	6 2	21   1	10	3	2 2	29 2	3	2	2 23	22	22	14	1	_	7	5	172	56	44	9	4	I	23 1	5 3	33 16	76	39	6	6	1 -	8	9	0	-	-   -	1	-	20	12	495	262	588	326
,, 6	162	76	117	47	49	16 3	38 1	13	11	5 7	74 4	7   _	-   -	- 27	18	118	64	12	4	9	5	340	58	20	5	16	9	83 4	5 6	62 28	3 269	139	21	10	6 9	22	14	7.1	12	2 .			28	20	526	243	699	318
,, 7	63	25	48	12	17	4 1	6	3	3	2 2	23 1	0 -	-   -	- 26	7	43	25	9	6	1	_	191	33	33	6	-1	_ :	23   1:	2 2	23 9	124	58	13	.1	3 _	15	- T-4	n n	1	3 2	_				1,240	573	1,568	662
., 8	60	28	127	68	24	12 3	33 1	19	1 -	_   5	51 3	5   -	-   -	- 26	23	83	57	1	1	5	5	90	46	23	13	10	7	74 4:	3 3	35 24	116	69	91	17	1 _	26	95	15 1	4 1	2   2	2	1		12	595	214	707	238
,, 9 ,	140	59	237	106	46	23 5	55 ]	11	9	3 5	56 3	8 :	2 -	_ 77	53	68	52	12	6	19	8	316	121	121	44	20	13	78 49		30 30	172	108	3.1	15	4 2	10	20	10 1	4	3 2	1	1	1		571	395	862	523
,, 10	99	49	164	43	42	18 4	4. 2	23	8	3 5	56 4.	5 -	-   -	- 43	35	47	38	9	6	45	19	173	09	54	20	5	3 4	37 37	7 4	17 28	159	85	23	14	2 9	1.6	24	7	~	2 2	2	1			1,120	633	1,678	824
" 11	205	99	152	46	42	11 7	4 2	26	12	3 5	54 3	1 1.	4 1:	3 73	59	57	38	19	12	55	23	192	81	71	23	9	6   6	35 45		7 48		135	43	20 -		24	10	20 0	9	1 1		-	72   3		721		1,115	588
· ,, 12	26	6	121	45	34	13 2	21 1	10	2	1 3	33 2	4 _	-   -	- 164	117	42	25	2	1	18	12	293	106	110	43	2	2 9	20 10	3	2 17	159	78	27	a	9 5	8	9	15	0.	1 1	_	-	95 4		1,106	608	1,598	789
,, 13	44	13	111	42	42	12 2	25	8	2 -	_	7	5 3	3	2 55	22	49	29	_	_	I	i	103	41	20	10	5		2 19	6	0 30	317	156	20	19	9 1	10	9	19	1		1	_	33   1		948	455	1,169	548
,, 14 ,	29	15	92	46	26	12 1	.7	1	2	1 2	5 1	5 -	-   -	- 18	14	57	47	3	2	7	6	58	29	20	10	15	7 4	8 35	1	9 14	97	61	7	12	2 1	21	14	10	- 1		1 ]	1	35 1	12	762	371	950	420
							-				4-		·															- 00				01	ĺ.	3		24	14	10	-				27 2	23	442	286	603	367
TOTAL	956	413	1317	516 3	67 1	38 37	3 13	36	53 2	20 43	28	3   29	9 2	5 730	496	652	420	71	38	184	93	2220	767	599	222	101	54 52	9   323	48	3 272	1985	1087	244 1	29 3	6 16	231	113	149 99	) Is	5 8	8	5 5	576 29	9,	,109	4,798 I	12,338	5,968

